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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/577,506			ling Date 30/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛			OTHER THAN OR SMALL ENTITY		
	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),		N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	ΞE	N/A		N/A		N/A			N/A		
	TAL CLAIMS CFR 1.16(I))		minus 20 =		*		x \$ =		OR	x \$ =		
IND	EPENDENT CLAIM CFR 1,16(h))	IS	minus 3 =		*		x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addit 35 U	ts of pap 50 (\$125 ional 50 .S.C. 41(er, the applicat for small entity sheets or fracti a)(1)(G) and 3	on thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									4		ļ	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
AMENDMENT	01/02/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 5	Minus	** 21	= 0]	X \$26 =	0	OR	x \$ =		
	Independent (37 CFR 1.16(h))	* 1	Minus	***6	= 0]	X \$110 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
						-	TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*	Minus	**	=]	x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))	*	Minus	***	=]	x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))					J						
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD 'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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